

LOCAL AGENCY AGREEMENT CHECKLIST

Request for Local Agency/State agreement for federal/state funding:

PROJECT NO. _____

A. Funds:

1. _____ Federal |

2. _____ Bicycle Lane Acct.

3. _____ Prop. 116 Bicycle _____ EEM _____ TE |

Is a CTC Allocation vote required? _____ Yes _____ No (Normally req'd for line 3. Items)

Has it been scheduled/voted? _____ Yes _____ No Date _____
(circle one)

B. Agreement Type

_____ Master _____ Supplement _____ Revised Supplement _____ Special Program

C. Phases to be covered: (For Obligation)

Funding: _____ PE _____ ROW _____ Const. _____ IOther (specify) _____

D. Standard Conditions:

Who will:

___ Advertise ___ Award ___ Administer ___ Furnish RE ___ Maintain

L = Local Agency S = State O = Other (Specify) _____

E. Reimburse State for:

_____ Resident Engineer _____ Inspection _____ Other (specify) _____

F. Cooperative Agreement no. _____ (if any)

G. If multiple fund sources are to be used provide estimates and clarifying information defining covenant references needed in the agreement.

H. Describe any other special conditions applying to the project.

I. Agency Contact Person _____ Date _____ Phone _____

Attach an updated finance letter.

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